Expendit	ental Independent ure Report de Sections 84203.5)	Type or print in ink. Amounts may be rounded to whole dollars.	Report covers period from2/28/2010	SUPPLEMENTA Date Stamp 3/31/2010	CALIFORNIA 465
SEE INSTRUCTI	ONS ON REVERSE	Amendment (Explain Below	w) through <u>3/27/2010</u>		Page <sup>1</sup> of <sup>17</sup>
	Amendment No 000		Date of election if applicable: (Month, Day, Year)		For Official Use Only
	Report No 148902-158		4/13/2010		
1. Commit	tee/Filer Information	I.D. NUMBER (if recipient committee) 1233321	Treasurer (If recipient of	committee)	
COMMITTEE/	FILER'S NAME	1233321	NAME OF TREASURER		
California De	ental Association Independent Expenditure PAC		Craig Noblett DDS		
STREET ADD	PRESS (NO P.O. BOX)		MAILING ADDRESS		
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY	STATE ZIP COL	DE AREA CODE/PHONE
Sacramento	CA	95814 (916)443-0505	Sacramento	CA 95814	(916) 443-0505
	AX/E-MAIL ADDRESS	73014 (710)443-0303	OPTIONAL: FAX/E-MAIL ADDRE		(210) 113 0303
2. Name of  NAME OF CAN  Bill Emmerso		ported or Opposed	OFFICE SOUGHT OR HELD AND DISTR State Senator District 37	ICT, IF APPLICABLE	CHECK ONE SUPPORT OPPOSE
NAME OF BAL	LOT MEASURE		BALLOT NO./LETTER JURISDICTIO	N	X SUPPORT OPPOSE
3. Indepen	ndent Expenditures Made Atta	1	ately labeled continuation sheets.  DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC.31)
3/2/2010	The Justin Company Sacramento, CA 95818	OPPO	EPENDENT EXPENDITURES SUPPORTI OSING OTHERS paign Literature and Mailings	NG / \$23,493.29	\$337,882.07
3/2/2010	Strong & Associates, Inc. Sacramento, CA 95811	OPPO	EPENDENT EXPENDITURES SUPPORTI OSING OTHERS paign Literature and Mailings; Bill Emmerso	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$.00
3/2/2010	Meta Information Services, Inc. Sacramento, CA 95814	OPPO	EPENDENT EXPENDITURES SUPPORTI OSING OTHERS paign Literature and Mailings; Bill Emmerso		\$.00

Sunnlan	upplemental Independent			SUPPLEMENTAL INDEPENDENT EXPENDI				
Expendi	iture Report	Type or print in ink. Amounts may be rounded to whole dollars.				CALIFORNIA FORM	465	
SEE INSTRUC	Type or print in ink. Amounts may be rounded to whole dollars.  TRUCTIONS ON REVERSE  Amendment No 000  Report No 148902-158  Amendment (Explain Below)  Report No 148902-158  TRUCTIONS ON REVERSE  Amendment (Explain Below)  Report No 148902-158  TRUCTIONS ON REVERSE  Amendment (Explain Below)  Report No 148902-158  TRUCTIONS ON REVERSE  Amendment (Explain Below)  Treasurer (If recipient committee)  NAME OF TREASURER  MAILING ADDRESS  TOTAL FAXIE-MAIL ADDRESS  TO FIGE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE  TOTAL FAXIE-MAIL ADDRESS OF PAYEE  BALLOT NO./LETTER JURISDICTION  STATE SUPPORTING OF EXPENDITURES  AMOUNT No. TOTAL FAXIE-MAIL ADDRESS OF PAYEE  No. TOTAL FAXIE-MAIL ADDRESS OF PAYEE  DESCRIPTION OF EXPENDITURES SUPPORTING / STA, 130,000  Tarrama, CA 91356  Multi Media Services, Corp. Alexandria, VA 22314  Multi Media Services, Corp. Alexandria, VA 22314  NO. TOTAL FAXIE SUPPORTING / OPPOSING OTHERS T. V. or Cable Arritine and Production Costs		Page 2	of 17				
	Amendment No 000		Date of election i	f applicable:		For Official U		
	Report No 148902-158		4/13/2010					
1. Comm	nittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committee)				
COMMITTE	EE/FILER'S NAME		NAME OF TREA	SURER				
STREET AI	DDRESS (NO P.O. BOX)		MAILING ADDR	ESS				
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CC	DDE AREA CODE	E/PHONE	
OPTIONAL	: FAX/E-MAIL ADDRESS		OPTIONAL: FAX	/E-MAIL ADDRESS				
2. Name (	of Candidate or Measure Sup	ported or Opposed					CUECK ONE	
	•	реголи от причения	OFFICE SOUGHT OR HI	ELD AND DISTRICT, IF APF	PLICABLE		PPORT OPPOSE	
NAME OF B	ALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION		sui	PPORT OPPOSE	
3. Indepe	endent Expenditures Made Att	ach additional information on appropria	tely labeled continuation	sheets.	1	CUMULATI CALENI	VE TO DATE DAR YEAR	
3/2/2010					\$15,000,00		- DEC.31)	
3/2/2010		OPPO	SING OTHERS		φ13,000.00	\$337,662.07		
3/4/2010		OPPO	SING OTHERS		\$47,130.00	\$337,882.07		
3/4/2010	National Cable Communications Chevy Chase, MD 20815	OPPO	PENDENT EXPENDITUI SING OTHERS r Cable Airtime and Produ	RES SUPPORTING /	\$10,186.40 n;	\$.00		

Sunnlam	antal Independent		SUPPLEMENTAL INDEPENDENT EXPENDITURE					
Expendit	ture Report	Type or print in ink. Amounts may be rounded to whole dollars.	from2/28/2010		Date Stamp 3/31/2010	CALIFOR FORM		65
SEE INSTRUCT	F CANDIDATE  F BALLOT MEASURE  pendent Expenditures Made	Amendment (Explain Below)	through <u>3/27/2010</u>			Page 3	of <u>1</u>	7
	Amendment No 000		Date of election if (Month, Day	applicable:		For Off	icial Use O	nly
	Report No 148902-158		4/13/2010					
1. Commi	ittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasurer	(If recipient committee)				
COMMITTEE	E/FILER'S NAME		NAME OF TREAS	SURER				
STREET AD	DRESS (NO P.O. BOX)		MAILING ADDRE	SS				
CITY	STATE 2	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CO	DE AREA	CODE/PHO	NE
OPTIONAL:	FAX/E-MAIL ADDRESS		OPTIONAL: FAX	E-MAIL ADDRESS				
2. Name o	of Candidate or Measure Supp	orted or Opposed					CHEC	K ONE
NAME OF CA	ANDIDATE		OFFICE SOUGHT OR HE	LD AND DISTRICT, IF APF	LICABLE		SUPPORT	OPPOSE
NAME OF BA	ALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION			SUPPORT	OPPOSE
3. Indepe	ndent Expenditures Made Attac	1			AMOUNT	C	ULATIVE TO ALENDAR Y	'EAR
3/4/2010	KESQ-TV Television Station/ABC	INDEP OPPOS	DESCRIPTION OF E ENDENT EXPENDITUR SING OTHERS Cable Airtime and Produce		\$12,431.25 n;	\$.00	IAN.1 - DEC.	31)
3/4/2010		OPPOS	ENDENT EXPENDITUR SING OTHERS Cable Airtime and Produc	ES SUPPORTING / ction Costs - Bill Emmerso	\$9,732.50	\$.00		
3/4/2010	KMIR-TV Television Station/NBC Palm Desert, CA 92260	OPPOS	ENDENT EXPENDITUR SING OTHERS Cable Airtime and Produc	ES SUPPORTING / etion Costs - Bill Emmerso	\$5,312.50 n;	\$.00		

Sunnlan	nental Independent				SUPPLEMENT	AL INDEPENDENT EX	PENDITURI
Expendi	ture Report	Type or print in ink. Amounts may be rounded to whole dollars.	·		Date Stamp 3/31/2010	CALIFORNIA FORM	<b>465</b>
SEE INSTRUC	Type or print in ink. Amounts may be rounded to whole dollars.    Amendment No		Page 4 of	; <u>17</u>			
	Amendment No 000		Date of election i	f applicable:		For Official Use	e Only
	Report No 148902-158		4/13/2010				
1. Comm	ittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committe	e)		
COMMITTE	E/FILER'S NAME		NAME OF TREA	SURER			
STREET AD	DDRESS (NO P.O. BOX)		MAILING ADDR	ESS			
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CC	DE AREA CODE/F	HONE
OPTIONAL:	FAX/E-MAIL ADDRESS		OPTIONAL: FAX	(/E-MAIL ADDRESS			
2. Name c	of Candidate or Measure Sup	ported or Opposed				<b>C</b> I	JECK ONE
		решене оррегое	OFFICE SOUGHT OR HI	ELD AND DISTRICT, IF AI	PPLICABLE		ORT OPPOSE
NAME OF BA	ALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPP	ORT OPPOSE
•	- 1		•		AMOUNT	CUMULATIVE   CALENDA	AR YEAR
3/4/2010	KDFX-TV Television Station/Fox	INDE OPPC T.V.	EPENDENT EXPENDITUI OSING OTHERS or Cable Airtime and Produ	RES SUPPORTING /	\$1,351.50	(JAN.1 - D	EC.31)
3/4/2010		OPPO	OSING OTHERS		\$24,843.29	\$337,882.07	
3/4/2010	Strong & Associates, Inc. Sacramento, CA 95811	OPPO	EPENDENT EXPENDITUI OSING OTHERS paign Literature and Mailing		\$20,878.19	\$.00	

Supplei	mental Independent					AL INDEPENDENT EXPE	ENDITURI
Expend	iture Report Code Sections 84203.5)	Type or print in ink. Amounts may be rounded to whole dollars.	Report cover		Date Stamp 3/31/2010	CALIFORNIA 4	65
SEE INSTRU	CTIONS ON REVERSE	Amendment (Explain Belo	through <u>3/27/201</u>	0		Page 5 of _	17
	Amendment No 000	-	Date of election i	f applicable:		For Official Use 0	
	Report No 148902-158	-	4/13/2010				
1. Comn	nittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committe	e)		
COMMITT	EE/FILER'S NAME		NAME OF TREA	SURER			
STREET A	ADDRESS (NO P.O. BOX)		MAILING ADDR	ESS			
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CC	DE AREA CODE/PHO	ONE
OPTIONA	L: FAX/E-MAIL ADDRESS		OPTIONAL: FAX	//E-MAIL ADDRESS			
2. Name	of Candidate or Measure Sur	pported or Opposed				CHE	CK ONE
	CANDIDATE	те странения	OFFICE SOUGHT OR HI	ELD AND DISTRICT, IF A	PPLICABLE		T OPPOSE
NAME OF I	BALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPPOR	T OPPOSE
3. Indep	endent Expenditures Made A		•		AMOUNT	CUMULATIVE T CALENDAR	YEAR
3/4/2010	Meta Information Services, Inc. Sacramento, CA 95814	IND	DESCRIPTION OF EPENDENT EXPENDITUI OSING OTHERS upaign Literature and Mailing	RES SUPPORTING /	\$2,080.96	(JAN.1 - DEC	J.31)
3/11/2010	Multi Media Services, Corp. Alexandria, VA 22314	OPP	EPENDENT EXPENDITUI OSING OTHERS or Cable Airtime and Produ		\$34,130.00	\$337,882.07	
3/11/2010	National Cable Communications Chevy Chase, MD 20815	OPP	EPENDENT EXPENDITUI OSING OTHERS or Cable Airtime and Produ 7		\$10,186.40	\$.00	

Sunnlam	ental Independent		SUPPLEMENTAL INDEPENDENT EXPENDITU					
Expendit	ture Report	Type or print in ink. Amounts may be rounded to whole dollars.	from2/28/2010		Date Stamp 3/31/2010	CALIFOR FORM		65
SEE INSTRUCT	F CANDIDATE  F BALLOT MEASURE  pendent Expenditures Made	Amendment (Explain Below)	through 3/27/2010			Page 6	of <u>1</u>	7
	Amendment No 000		Date of election if (Month, Day	applicable:		For Off	icial Use O	nly
	Report No <u>148902-158</u>		4/13/2010					
1. Commi	ttee/Filer Information	I.D. NUMBER (if recipient committee)	Treasurer	(If recipient committee)				
COMMITTEE	E/FILER'S NAME		NAME OF TREAS	SURER				
STREET ADI	DRESS (NO P.O. BOX)		MAILING ADDRE	SS				
CITY	STATE Z	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CO	DE AREA	CODE/PHO	NE
OPTIONAL: I	FAX/E-MAIL ADDRESS		OPTIONAL: FAX	E-MAIL ADDRESS				
2. Name o	f Candidate or Measure Supp	orted or Opposed					CHEC	K ONE
NAME OF CA	NDIDATE		OFFICE SOUGHT OR HE	LD AND DISTRICT, IF APF	PLICABLE		SUPPORT	OPPOSE
NAME OF BA	LLOT MEASURE		BALLOT NO./LETTER	JURISDICTION			SUPPORT	OPPOSE
3. Indepe	ndent Expenditures Made Attac	1			AMOUNT	C	ULATIVE TO ALENDAR Y	'EAR
3/11/2010	KESQ-TV Television Station/ABC	INDEP OPPOS	DESCRIPTION OF E ENDENT EXPENDITUR SING OTHERS Cable Airtime and Produce		\$7,331.25	\$.00	IAN.1 - DEC.	31)
3/11/2010		OPPOS	ENDENT EXPENDITUR SING OTHERS Cable Airtime and Produc	ES SUPPORTING / ction Costs - Bill Emmerso	\$6,043.50	\$.00		
3/11/2010	KMIR-TV Television Station/NBC Palm Desert, CA 92260	OPPOS	ENDENT EXPENDITUR SING OTHERS Cable Airtime and Produc	ES SUPPORTING / etion Costs - Bill Emmerso	\$2,741.25 n;	\$.00		

Sunnlan	nental Independent				SUPPLEMENT	AL INDEPENDENT EX	
<b>Expendi</b>	iture Report Code Sections 84203.5)	Type or print in ink. Amounts may be rounded to whole dollars.	·		Date Stamp 3/31/2010	CALIFORNIA FORM	<u> 465</u>
SEE INSTRUC	Type or print in ink. Amounts may be rounded to whole dollars.    Amendment No	Page <u>7</u> of	; <u>17</u>				
	Amendment No 000		Date of election i	f applicable:		For Official Us	e Only
	Report No 148902-158		4/13/2010				
1. Comm	nittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committe	e)		
COMMITTE	EE/FILER'S NAME		NAME OF TREA	SURER			
STREET AL	DDRESS (NO P.O. BOX)		MAILING ADDR	ESS			
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CC	DDE AREA CODE/F	PHONE
OPTIONAL	: FAX/E-MAIL ADDRESS		OPTIONAL: FAX	(/E-MAIL ADDRESS			
2. Name o	of Candidate or Measure Sup	ported or Opposed				CI	HECK ONE
NAME OF C			OFFICE SOUGHT OR HI	ELD AND DISTRICT, IF A	PPLICABLE		ORT OPPOSE
NAME OF B	ALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPP	ORT OPPOSE
3. Indepe	•		•		AMOUNT	CUMULATIVE CALENDA	AR YEAR
3/11/2010	KDFX-TV Television Station/Fox	INDE OPPC T.V.	EPENDENT EXPENDITUI OSING OTHERS or Cable Airtime and Produ	RES SUPPORTING /	\$1,377.00	\$.00	DEC.31)
3/11/2010		OPPO	OSING OTHERS		\$350.00	\$337,882.07	
3/12/2010	The Justin Company Sacramento, CA 95818	OPPO	EPENDENT EXPENDITUI DSING OTHERS Daign Literature and Mailing		\$24,585.77	\$337,882.07	

Sunnlar	nental Independent		SUPPLEMENTAL INDEPENDENT						
Expend	iture Report Code Sections 84203.5)	Type or print in ink. Amounts may be rounded to whole dollars.	Report cover		Date Stamp 3/31/2010	CALIFORNIA FORM	<b>465</b>		
SEE INSTRUC	CTIONS ON REVERSE	Amendment (Explain Bel	ow) through <u>3/27/201</u>	0		Page <u>8</u> of	17		
	Amendment No 000	-	Date of election i (Month, Day	f applicable:		For Official Use			
	Report No	-	4/13/2010						
1. Comm	nittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committe	e)	_			
COMMITTI	EE/FILER'S NAME		NAME OF TREA	SURER					
STREET A	DDRESS (NO P.O. BOX)		MAILING ADDR	ESS					
CITY	STATE	ZIP CODE AREA CODE/PHONE	СІТҮ		STATE ZIP CC	DDE AREA CODE/PH	IONE		
OPTIONAL	.: FAX/E-MAIL ADDRESS		OPTIONAL: FAX	/E-MAIL ADDRESS					
2. Name	of Candidate or Measure Sup	oported or Opposed				CHI	CK ONE		
NAME OF C	CANDIDATE		OFFICE SOUGHT OR HI	ELD AND DISTRICT, IF A	PPLICABLE		RT OPPOSE		
NAME OF E	BALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPPO	RT OPPOSE		
3. Indepe	endent Expenditures Made A		riately labeled continuation		AMOUNT	CUMULATIVE CALENDAR	YEAR		
3/12/2010	Strong & Associates, Inc. Sacramento, CA 95811	INE	DEPENDENT EXPENDITUIPOSING OTHERS  Apaign Literature and Mailing	RES SUPPORTING /	\$21,328.19	\$.00	.0.31)		
3/12/2010	Meta Information Services, Inc. Sacramento, CA 95814	OPI	DEPENDENT EXPENDITUI POSING OTHERS npaign Literature and Mailing		\$1,407.03	\$.00			
3/16/2010	The Justin Company Sacramento, CA 95818	OPI	DEPENDENT EXPENDITUI POSING OTHERS npaign Literature and Mailing		\$24,426.22	\$337,882.07			

Expenditu	ıre Report	Type or print in ink. Amounts may be rounded to whole dollars.			SUPPLEMENT. Date Stamp 3/31/2010	CALIFORNIA FORM	465
SEE INSTRUCTION	Amendment No 000	Page 9 of	<b>i</b> 17				
A	mendment No 000	- ( <u>Explain 25)</u>	Date of election in	f applicable:		For Official Us	
	Report No 148902-158	-	4/13/2010				
1. Commit	tee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committee	ee)		
COMMITTEE/F	FILER'S NAME		NAME OF TREA	SURER			
STREET ADDI	RESS (NO P.O. BOX)		MAILING ADDRE	ESS			
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CC	DDE AREA CODE/F	PHONE
OPTIONAL: FA	AX/E-MAIL ADDRESS		OPTIONAL: FAX	/E-MAIL ADDRESS			
2. Name of	Candidate or Measure Sup	oported or Opposed				CI	HECK ONE
NAME OF CAN	DIDATE		OFFICE SOUGHT OR HE	ELD AND DISTRICT, IF A	APPLICABLE		ORT OPPOSE
NAME OF BALI	LOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPP	ORT OPPOSE
3. Indepen	dent Expenditures Made At	tach additional information on appropr	riately labeled continuation	sheets.		CUMULATIVE CALENDA	
DATE						(JAN.1 - D	
3/16/2010		OPF	POSING OTHERS			\$.00	
3/16/2010	Meta Information Services, Inc. Sacramento, CA 95814	OPF	DEPENDENT EXPENDITUR POSING OTHERS npaign Literature and Mailing		\$1,718.29	\$.00	
3/18/2010	Multi Media Services, Corp. Alexandria, VA 22314	OPF	DEPENDENT EXPENDITURE POSING OTHERS . or Cable Airtime and Produ		\$34,130.00	\$337,882.07	

Sunnlam	ental Independent				SUPPLEMENT	AL INDEPENDENT EX	PENDITURI
Expendit	ture Report	Type or print in ink. Amounts may be rounded to whole dollars.	from		Date Stamp 3/31/2010	CALIFORNIA FORM	<b>465</b>
SEE INSTRUCT	Amounts may be to whole dolla  ETIONS ON REVERSE  Amendment No 000  Report No 148902-158  Intee/Filer Information  Et/Filer's NAME  DDRESS (NO P.O. BOX)  STATE ZIP CODE AREA CODE  FAX/E-MAIL ADDRESS  Of Candidate or Measure Supported or Oppose ANDIDATE  ALLOT MEASURE  Pandent Expenditures Made Attach additional information of NAME AND ADDRESS OF PAYEE  National Cable Communications Chevy Chase, MD 20815  KESQ-TV Television Station/ABC Palm Desert, CA 92211	Amendment (Explain Below	through <u>3/27/201</u>	0		Page 10 of	: 17
	Amendment No 000		Date of election i	f applicable:		For Official Use	
	Report No 148902-158		4/13/2010				
1. Commi	ittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committe	e)	·	
COMMITTEE	E/FILER'S NAME		NAME OF TREA	SURER			
STREET AD	DRESS (NO P.O. BOX)		MAILING ADDR	ESS			
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CC	DDE AREA CODE/P	HONE
OPTIONAL:	FAX/E-MAIL ADDRESS		OPTIONAL: FAX	//E-MAIL ADDRESS			
2. Name o	of Candidate or Measure Sup	ported or Opposed				CL	IECK ONE
NAME OF CA	•		OFFICE SOUGHT OR HI	ELD AND DISTRICT, IF AI	PPLICABLE		ORT OPPOSE
NAME OF BA	ALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPP	ORT OPPOSE
3. Indepe			itely labeled continuation		AMOUNT	CUMULATIVE CALENDA (JAN.1 - D	R YEAR
3/18/2010	National Cable Communications	INDE	PENDENT EXPENDITUI SSING OTHERS or Cable Airtime and Produ	RES SUPPORTING /	\$10,186.40	\$.00	<u>LC.31)</u>
3/18/2010		OPPO	PENDENT EXPENDITUI SING OTHERS or Cable Airtime and Produ		\$7,331.25 on;	\$.00	
3/18/2010	KPSP-TV Television Station/CBS Thoudand Palms, CA 92276	OPPO	PENDENT EXPENDITUI SING OTHERS or Cable Airtime and Produ		\$6,043.50 on;	\$.00	

Sunnlan	nental Independent				SUPPLEMENT	AL INDEPENDENT EXF	PENDITURI
Expendi	iture Report Code Sections 84203.5)	Type or print in ink. Amounts may be rounded to whole dollars.	from		Date Stamp 3/31/2010	CALIFORNIA FORM	<del>165</del>
SEE INSTRUC	CTIONS ON REVERSE	Amendment (Explain Below	w) through <u>3/27/201</u>	0		Page 11 of	17
	Amendment No 000		Date of election (Month, Da	f applicable:		For Official Use	
	Report No 148902-158		4/13/2010				
1. Comm	nittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committe	e)		
COMMITTE	EE/FILER'S NAME		NAME OF TREA	SURER			
STREET AI	DDRESS (NO P.O. BOX)		MAILING ADDR	ESS			
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CC	DDE AREA CODE/PH	HONE
OPTIONAL	: FAX/E-MAIL ADDRESS		OPTIONAL: FAX	(/E-MAIL ADDRESS			
2. Name (	of Candidate or Measure Sup	ported or Opposed				СН	ECK ONE
NAME OF C	ANDIDATE		OFFICE SOUGHT OR H	ELD AND DISTRICT, IF A	PPLICABLE		ORT OPPOSE
NAME OF B	ALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPPO	OPPOSE
3. Indepe	endent Expenditures Made At	1	ately labeled continuation  DESCRIPTION OF		AMOUNT	CUMULATIVE CALENDAF (JAN.1 - DE	R YEAR
3/18/2010	KMIR-TV Television Station/NBC Palm Desert, CA 92260	INDE	PENDENT EXPENDITURED OF CABLE Airtime and Produced Produc	RES SUPPORTING /	\$2,741.25	\$.00	20.01)
3/18/2010	KDFX-TV Television Station/Fox Palm Desert, CA 92211	OPPO	PENDENT EXPENDITURED OF CABLE Airtime and Produce to Cable Airtime and Pro		\$1,377.00	\$.00	
3/20/2010	The Justin Company Sacramento, CA 95818	OPPO	EPENDENT EXPENDITURED SING OTHERS beign Literature and Mailing		\$27,165.86	\$337,882.07	

Sunnlan	nental Independent				SUPPLEMENT	AL INDEPENDENT EXP	ENDITURI
Expendi	iture Report Code Sections 84203.5)	Type or print in ink. Amounts may be rounded to whole dollars.	Report cover		Date Stamp 3/31/2010	CALIFORNIA FORM	65
SEE INSTRUC	TIONS ON REVERSE	Amendment (Explain Bel	low) through <u>3/27/201</u>	0		Page <u>12</u> of _	17
	Amendment No 000	-	Date of election i (Month, Day	f applicable:		For Official Use	_
	Report No	-	4/13/2010				
1. Comm	ittee/Filer Information	I.D. NUMBER (if recipient committee	Treasure	(If recipient committe	e)		
COMMITTE	EE/FILER'S NAME	l .	NAME OF TREA	SURER			
STREET AL	DDRESS (NO P.O. BOX)		MAILING ADDRI	ESS			
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CC	DE AREA CODE/PH	ONE
OPTIONAL:	: FAX/E-MAIL ADDRESS		OPTIONAL: FAX	/E-MAIL ADDRESS			
2. Name o	of Candidate or Measure Sup	pported or Opposed				CHE	CK ONE
NAME OF C	ANDIDATE		OFFICE SOUGHT OR HE	ELD AND DISTRICT, IF A	PPLICABLE		RT OPPOSE
NAME OF B	ALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPPOR	RT OPPOSE
3. Indepe	endent Expenditures Made A		riately labeled continuation  DESCRIPTION OF		AMOUNT	CUMULATIVE T	YEAR
3/23/2010	Strong & Associates, Inc. Sacramento, CA 95811	INI	DEPENDENT EXPENDITUE POSING OTHERS npaign Literature and Mailing	RES SUPPORTING /	\$23,786.00	(JAN.1 - DE	C.31)
3/23/2010	Meta Information Services, Inc. Sacramento, CA 95814	OPI	DEPENDENT EXPENDITUE POSING OTHERS npaign Literature and Mailing		\$1,265.66	\$.00	
3/23/2010	Studio Z Recording, Inc. Sacramento, CA 95819	OPI	DEPENDENT EXPENDITURE  POSING OTHERS  '. or Cable Airtime and Produ		\$1,360.88	\$337,882.07	

Sunnla	mental Independent				SUPPLEMENT	AL INDEPENDENT EX	PENDITURI
Supplemental Independent Expenditure Report (Government Code Sections 84203.5) SEE INSTRUCTIONS ON REVERSE  Amendment No 000		Type or print in ink. Amounts may be rounded to whole dollars.	Report cover		Date Stamp 3/31/2010	CALIFORNIA FORM	<del>465</del>
		Amendment (Explain Below	through <u>3/27/201</u>	0		Page 13 of	17
			Date of election i	f applicable:		For Official Use	
	Report No		4/13/2010				
1. Comr	mittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committe	e)		
COMMITT	TEE/FILER'S NAME		NAME OF TREA	SURER			
STREET	ADDRESS (NO P.O. BOX)		MAILING ADDR	ESS			
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CO	DE AREA CODE/P	HONE
OPTIONA	IL: FAX/E-MAIL ADDRESS		OPTIONAL: FAX	(/E-MAIL ADDRESS			
 2. Name	of Candidate or Measure Sup	ported or Opposed				CL	IECK ONE
	CANDIDATE		OFFICE SOUGHT OR HI	ELD AND DISTRICT, IF AR	PPLICABLE		ORT OPPOSE
NAME OF	BALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPP	ORT OPPOSE
•	endent Expenditures Made Att		·		, MOUNT	CUMULATIVE   CALENDA	R YEAR
3/25/2010	Alexandria, VA 22314 OPPO		DESCRIPTION OF PENDENT EXPENDITUI SING OTHERS T.V. or Cable Airtime an	RES SUPPORTING /	\$40,630.00	(JAN.1 - D \$337,882.07	EC.31)
3/25/2010	Chevy Chase, MD 20815 OPPO		PENDENT EXPENDITUI SING OTHERS r Cable Airtime and Produ		\$10,186.40 on;	\$.00	
Palm Desert, CA 92211 OPPOS		PENDENT EXPENDITUI SING OTHERS r Cable Airtime and Produ		\$7,161.25	\$.00		

Sunnlam	antal Independent				SUPPLEMENT	AL INDEPENDE	NT EXPE	NDITUR
Supplemental Independent Expenditure Report (Government Code Sections 84203.5) SEE INSTRUCTIONS ON REVERSE		Type or print in ink. Amounts may be rounded to whole dollars.	from2/28/2010		Date Stamp 3/31/2010	CALIFORI FORM		65
		Amendment (Explain Below)	through <u>3/27/2010</u>	)		Page _14	of <u>1</u>	7
	Amendment No 000		Date of election if (Month, Day	applicable:			icial Use O	nly
	Report No 148902-158		4/13/2010					
1. Commi	ittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committee	·)			
COMMITTEE	E/FILER'S NAME		NAME OF TREA	SURER				
STREET AD	DRESS (NO P.O. BOX)		MAILING ADDRE	SS				
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CO	DE AREA	CODE/PHOI	NE
OPTIONAL:	FAX/E-MAIL ADDRESS		OPTIONAL: FAX	E-MAIL ADDRESS				
2. Name o	of Candidate or Measure Supp	orted or Opposed					CHEC	K ONE
NAME OF CA	ANDIDATE		OFFICE SOUGHT OR HE	LD AND DISTRICT, IF AP	PLICABLE		SUPPORT	OPPOSE
NAME OF BA	ALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION			SUPPORT	OPPOSE
-	ndent Expenditures Made Attac	1			AMOUNT	C/	JLATIVE TO ALENDAR Y	'EAR
3/25/2010	Thoudand Palms, CA 92276 OPPO		DESCRIPTION OF E ENDENT EXPENDITUR ING OTHERS Cable Airtime and Produce	ES SUPPORTING /	\$5,822.50	\$.00	AN.1 - DEC.	31)
3/25/2010	Palm Desert, CA 92260 OPPO		ENDENT EXPENDITUR ING OTHERS Cable Airtime and Produce		\$2,635.00	\$.00		
3/25/2010	KDFX-TV Television Station/Fox Palm Desert, CA 92211	OPPOS	ENDENT EXPENDITUR ING OTHERS Cable Airtime and Produc		\$1,776.50	\$.00		

Sunnlam	ental Independent				SUPPLEMENTA	AL INDEPENDENT EXP	ENDITURI
Supplemental Independent Expenditure Report (Government Code Sections 84203.5) SEE INSTRUCTIONS ON REVERSE		Type or print in ink. Amounts may be rounded to whole dollars.	Report covers		Date Stamp 3/31/2010	CALIFORNIA FORM	<del> 65</del>
		Amendment (Explain Bel	ow) through <u>3/27/201</u>	0		Page 15 of	17
,	Amendment No 000		Date of election i	f applicable:		For Official Use	
	Report No		4/13/2010				
1. Commit	tee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committee	ee)		
COMMITTEE	/FILER'S NAME		NAME OF TREA	SURER			
STREET ADD	PRESS (NO P.O. BOX)		MAILING ADDRE	ESS			
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CO	DE AREA CODE/PH	IONE
OPTIONAL: F	AX/E-MAIL ADDRESS		OPTIONAL: FAX	/E-MAIL ADDRESS			
2. Name of	Candidate or Measure Sup	ported or Opposed				CHE	ECK ONE
NAME OF CAN	NDIDATE		OFFICE SOUGHT OR HE	ELD AND DISTRICT, IF A	PPLICABLE		RT OPPOSE
NAME OF BAL	LOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPPO	RT OPPOSE
•	ndent Expenditures Made Att		•		1	CUMULATIVE CALENDAR	YEAR
3/25/2010	NAME AND ADDRES  KPSI-AM Radio Station		DESCRIPTION OF DEPENDENT EXPENDITURE		\$2,850.00	(JAN.1 - DE	(C.31)
	Palm Springs, CA 92262		POSING OTHERS io Airtime and Production Co	osts; Bill Emmerson; SD			
3/25/2010	Palm Springs, CA 92262 OPI		DEPENDENT EXPENDITURED FOR SING OTHERS TO Airtime and Production Co		\$1,190.00	\$.00	
Sacramento, CA 95818		NDEPENDENT EXPENDITURES SUPPORTING / \$26,006.76 \$337 DPPOSING OTHERS Campaign Literature and Mailings					

Sunnlar	nental Independent				SUPPLEMENT	AL INDEPENDENT EXF	ENDITUR
Expendi	iture Report Code Sections 84203.5)	Type or print in ink. Amounts may be rounded to whole dollars.	from		Date Stamp 3/31/2010	CALIFORNIA FORM	<b>l</b> 65
SEE INSTRUCTIONS ON REVERSE		Amendment (Explain Below	v) through <u>3/27/201</u>	10		Page <u>16</u> of	17
	Amendment No 000	-	Date of election (Month, Da	if applicable:		For Official Use	
	Report No	-	4/13/2010				
1. Comm	nittee/Filer Information	I.D. NUMBER (if recipient committee)	Treasure	(If recipient committe	e)		
COMMITTE	EE/FILER'S NAME		NAME OF TREA	ASURER			
STREET A	DDRESS (NO P.O. BOX)		MAILING ADDR	ESS			
CITY	STATE	ZIP CODE AREA CODE/PHONE	CITY		STATE ZIP CC	DE AREA CODE/PH	IONE
OPTIONAL	.: FAX/E-MAIL ADDRESS		OPTIONAL: FAX	(/E-MAIL ADDRESS			
2. Name (	of Candidate or Measure Sup	pported or Opposed				CHI	ECK ONE
NAME OF C	<u> </u>		OFFICE SOUGHT OR H	ELD AND DISTRICT, IF A	PPLICABLE		ORT OPPOSE
NAME OF B	BALLOT MEASURE		BALLOT NO./LETTER	JURISDICTION		SUPPO	ORT OPPOSE
3. Indepe	endent Expenditures Made A		itely labeled continuation		AMOUNT	CUMULATIVE CALENDAF (JAN.1 - DE	R YEAR
3/27/2010	Strong & Associates, Inc. Sacramento, CA 95811	OPPO	PENDENT EXPENDITU SING OTHERS aign Literature and Mailin		\$23,786.00	\$.00	

## Supplemental Independent

Type or print in ink.

	SUPPLEMENTA	L INDEPENDENT I	EXPENDITURE
R	eport covers period	CALIFORNIA	465
rom	2/28/2010	FORM	TUJ
hrough	3/27/2010	Page <u>17</u>	of <u>17</u>

	enditure Report			s may be rounded nole dollars.	Report covers period from $2/28/2010$	CALIF FOR	california 465			
SEE INS	STRUCTIONS ON REVERSE				through <u>3/27/2010</u>	Page <u>17</u>	of <u>17</u>			
NAME C	OF FILER				•	I.D. NUMI	BER (If recipient com.)			
Californ	ia Dental Association Independent Expenditure PAC					1233321				
4. S	ummary									
1.	Total independent expenditures made of \$	100 or more th	is period. (Part 3.)				\$323,252.07			
2.	Total independent expenditures under \$10	0 made this pe	eriod. (Not itemized.	)			\$0.00			
3.	3. Total independent expenditures made this period (Add Lines 1 + 2.)									
	iling Officers Enter the name and address of	each filing officer	with whom the filer's mo	st recent campaign statemen	ts (Form 450, 460 or 461) have bee	en filed.				
5. F		each filing officer	with whom the filer's mo	st recent campaign statemen  3) NAME OF FILING O		en filed.				
5. Fi	NAME OF FILING OFFICER ecretary of State	each filing officer	with whom the filer's mo	3) NAME OF FILING O	FFICER	en filed.				
5. Fi	NAME OF FILING OFFICER	each filing officer	with whom the filer's mo			en filed.				
5. Fi	NAME OF FILING OFFICER ecretary of State DDRESS (NO. AND STREET)	each filing officer	with whom the filer's mo	3) NAME OF FILING O	FFICER	en filed.	ZIP CODE			
5. Fi	NAME OF FILING OFFICER ecretary of State DDRESS (NO. AND STREET)  TY acramento			3) NAME OF FILING OF ADDRESS	FFICER (NO. AND STREET)		ZIP CODE			
5. Fi	NAME OF FILING OFFICER ecretary of State DDRESS (NO. AND STREET)  TY	STATE	ZIP CODE	3) NAME OF FILING OF	FFICER (NO. AND STREET)		ZIP CODE			
5. Fi	NAME OF FILING OFFICER ecretary of State DRESS (NO. AND STREET)  TY acramento NAME OF FILING OFFICER egistrar of Voters - Riverside County	STATE	ZIP CODE	ADDRESS  CITY  4) NAME OF FILING OF	(NO. AND STREET)  FFICER		ZIP CODE			
5. Fi	NAME OF FILING OFFICER ecretary of State DRESS (NO. AND STREET)  TY acramento NAME OF FILING OFFICER	STATE	ZIP CODE	3) NAME OF FILING OF ADDRESS	FFICER (NO. AND STREET)		ZIP CODE			
5. Fi	NAME OF FILING OFFICER ecretary of State DDRESS (NO. AND STREET)  TY acramento NAME OF FILING OFFICER egistrar of Voters - Riverside County DDRESS (NO. AND STREET)	STATE	ZIP CODE	ADDRESS  CITY  4) NAME OF FILING OF	(NO. AND STREET)  FFICER		ZIP CODE			

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on	3/30/2010	By Spinelli Spinelli Spinelli
	DATE	SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on		By
	DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR
Executed on		By
	DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT
Executed on		By
	DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT